

SO ORDERED: February 25, 2019.




Robyn L. Moberly
United States Bankruptcy Judge

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE SOUTHERN DISTRICT OF INDIANA
INDIANAPOLIS DIVISION**

In re:

USA GYMNASTICS,¹

Debtor.

Chapter 11

Case No. 18-09108-RLM-11

**ORDER APPROVING DEBTOR'S MOTION FOR ORDER ESTABLISHING
DEADLINES FOR FILING PROOFS OF CLAIM AND APPROVING FORM
AND MANNER OF NOTICE THEREOF**

This matter came before the Court on the *Debtor's Motion For Order Establishing Deadlines For Filing Proofs Of Claim And Approving Form And Manner Of Notice Thereof* (the

¹ The last four digits of the Debtor's federal tax identification number are 7871. The location of the Debtor's principal office is 130 E. Washington Street, Suite 700, Indianapolis, Indiana 46204.

“**Motion**”),² filed by USA Gymnastics as debtor and debtor in possession (the “**Debtor**”), for the entry of an order (this “**Bar Date Order**”) pursuant to sections 501 and 502 of title 11 of the United States Code, 11 U.S.C. §§ 101–1532 (the “**Bankruptcy Code**”) and Rules 2002(a), 3001, 3002, and 3003 of the Federal Rules of Bankruptcy Procedure; and upon the Court’s consideration of the objections filed to the Motion by the Additional Tort Claimants Committee of Sexual Abuse Survivors, Kelly Doe, and the Indiana Attorney General (the “**Objections**”) [Dkts. 255, 261, and 269] and the Debtor’s reply to those objections [Dkt. 270]; the Court finding that (i) it has jurisdiction over this matter pursuant to 28 U.S.C. §§ 157 and 1334; (ii) this matter is a core proceeding pursuant to 28 U.S.C. § 157(b)(2); (iii) the relief requested in the Motion is in the best interests of the Debtor, its estate, and creditors; and after due deliberation, and good and sufficient cause appearing therefore, the Court hereby determines the Motion should be GRANTED.

IT IS HEREBY ORDERED:

1. The Motion is granted as set forth herein.
2. The Objections are overruled.
3. The Personalized Proof of Claim Form, the Sexual Abuse Proof of Claim Form, the General Bar Date Notice, the Sexual Abuse Claims Bar Date Notice, the Publication Notice, and the Confidentiality Agreement substantially in the forms attached hereto as Exhibits 1, 2, 3, 4, 5, and 6, respectively, are approved in all respects. The form and manner of notice of the Bar Dates approved herein are deemed to fulfill the notice requirements of the Bankruptcy Code, the Bankruptcy Rules, and the Local Rules for the Bankruptcy Court for the Southern District of Indiana, and notice of the Bar Dates in the form and manner as proposed by the Debtor herein is fair and reasonable and will provide good, sufficient, and due notice to all creditors of their rights

² Capitalized terms used herein and not defined shall have the meanings given to them in the Motion.

and obligations in connection with claims they may assert against the Debtor's estate in this chapter 11 case. Accordingly, the Debtor is authorized and directed to serve and/or publish the Bar Date Notice Packages in the manner described herein and in the Motion.

4. Except as otherwise provided herein, all persons and entities that assert a claim (as defined in section 101(5) of the Bankruptcy Code) against the Debtor which arose before December 5, 2018 (the "**Petition Date**"), including both Survivors asserting Sexual Abuse Claims and other creditors, shall submit a written proof of such Claim so that it is *actually received* on or before **4:00 p.m. (prevailing Eastern time) on April 29, 2019** (the "**General Bar Date**" and the "**Sexual Abuse Claims Bar Date**") by Omni Management Group, Inc. (the "**Claims Agent**"), in accordance with this Bar Date Order.

5. For the purposes of determining whether an individual should submit a General Claim or Sexual Abuse Claim, sexual abuse is defined as any and all acts or omissions that the Debtor may be legally responsible for that arise out of, are based upon, or involve sexual conduct or misconduct, sexual abuse or molestation, sexual exploitation, indecent assault and/or battery, rape, pedophilia, ephebophilia, or sexually related psychological or emotional harm, humiliation, anguish, shock, sickness, disease, disability, dysfunction, or intimidation, or any other sexual misconduct or injury, or contacts or interactions of a sexual nature between an adult or child and a medical professional, coach, trainer, therapist, volunteer, or other authority figure affiliated with the Debtor, or any current or former employee or volunteer of the Debtor, or any other person for whose acts or failures the Debtor is or was allegedly responsible, or the alleged failure by the Debtor or its agents, employees, or volunteers to report the same. An adult or child may have been sexually abused whether or not this activity involved explicit force, whether or not this activity

involved genital or other physical contact, and whether or not there was physical, psychological, or emotional harm to the adult or child.

6. Proofs of Claim asserted by governmental units must be submitted so as to be *actually received* by the Claims Agent on or before **4:00 p.m. (prevailing Eastern time) on June 3, 2019** (the “**Governmental Bar Date**”), the date that is 180 days from the Petition Date.

7. If the Debtor amends or supplements its Schedules of Assets and Liabilities and/or Statement of Financial Affairs (the “**Schedules**”) subsequent to the date hereof, the Debtor shall provide notice of any amendment or supplement to the holders of Claims affected thereby. The Debtor shall also provide such claimants with notice that they may be entitled to file amended or original Proofs of Claim in light of the amendment(s) to the Schedules, but that they must do so on or before the later of: (a) the General Bar Date; or (b) 30 days after the holder of a claim is served with notice that the Debtor amended its Schedules to identify, reduce, delete, or change the amount, priority, classification, or other status of such claim (the “**Amended Schedules Bar Date**”).

8. Any person or entity that holds a Claim arising from the rejection of an executory contract or unexpired lease must submit a Proof of Claim based on such rejection on or before the later of: (a) the General Bar Date; or (b) any date the Court may fix in the applicable order authorizing such rejection or, if no such date is provided, 30 days from the date of entry of such order (the “**Rejection Bar Date**”). The Debtor will provide notice of the Rejection Bar Date to the contract or lease counterparty whose contract or lease is being rejected at the time the Debtor rejects any executory contract or unexpired lease.

9. The Debtor shall mail to all known creditors **other than Survivors who do not have claims other than Sexual Abuse Claims** a Personalized Proof of Claim Form substantially

in the form attached hereto as Exhibit 1, which is hereby approved, indicating on the form how the Debtor has listed each creditor's Claim in the Schedules (including the amount of the Claim; whether the Claim has been scheduled as contingent, unliquidated, or disputed; whether the Claim is listed as secured, unsecured priority, or general unsecured; and that the Personalized Proof of Claim Form should not be used to assert a Sexual Abuse Claim).

10. The following procedures shall apply to the submission of all Proofs of Claim **other than for Sexual Abuse Claims** against the Debtor in this chapter 11 case:

- a. Each Proof of Claim asserting a General Claim, Governmental Claim, Amended Schedules Claim, or Rejection Claim must be submitted so as to ***actually be received*** by the Claims Agent on or before the applicable Bar Date either by: (i) the interface available on the Claims Agent's website: <https://omnimgt.com/usagymnastics>; or (ii) first-class U.S. Mail, overnight mail, or hand-delivery at the following address: USA Gymnastics Claims Processing, c/o Omni Management Group, 5955 DeSoto Avenue, Suite 100, Woodland Hills, California 91367; ***provided, for the avoidance of doubt, PROOFS OF CLAIM SUBMITTED BY FACSIMILE OR ELECTRONIC MAIL WILL NOT BE ACCEPTED AND WILL NOT BE DEEMED TIMELY SUBMITTED.***
- b. Each Proof of Claim asserting a General Claim, Governmental Claim, Amended Schedules Claim, or Rejection Claim must: (i) be written in English; (ii) include a Claim amount denominated in United States dollars; (iii) conform substantially with the Personalized Proof of Claim Form or Official Form 410; (iv) be signed or electronically transmitted, through the interface available on the Claims Agent's website at: <https://omnimgt.com/usagymnastics> by the claimant or by an authorized agent or legal representative of the claimant; and (v) unless otherwise consented to by USAG in writing, include supporting documentation unless voluminous, in which case a summary must be attached or an explanation provided as to why documentation is not available.
- c. Parties who submit a Proof of Claim asserting a General Claim, Governmental Claim, Amended Schedules Claim, or Rejection Claim by mail and who wish to receive proof of receipt thereof must include an additional copy of their Proof of Claim and a self-addressed, stamped envelope.

11. Sexual Abuse Claims shall be submitted on a Sexual Abuse Proof of Claim Form substantially in the form attached hereto as Exhibit 2. The following procedures shall apply to the submission of Sexual Abuse Claims against the Debtor in this chapter 11 case:

- a. Each Sexual Abuse Proof of Claim Form, including any supporting documentation, must be submitted so as to ***actually be received*** by the Claims Agent on or before the Sexual Abuse Claims Bar Date by: (a) the interface available on the Claims Agent's website at <https://omnimgt.com/usagymnastics/sexualabuseclaims>; or (b) first-class U.S. Mail, overnight mail, or hand-delivery at the following address: USA Gymnastics Sexual Abuse Claims Processing, c/o Omni Management Group, 5955 DeSoto Avenue, Suite 100, Woodland Hills, California 91367; ***provided, for the avoidance of doubt, SEXUAL ABUSE PROOF OF CLAIM FORMS SUBMITTED BY FACSIMILE OR ELECTRONIC MAIL WILL NOT BE ACCEPTED AND WILL NOT BE DEEMED TIMELY SUBMITTED.***
- b. Each Sexual Abuse Proof of Claim Form must: (i) be written in English; (ii) conform substantially with the Sexual Abuse Proof of Claim Form provided by USAG; and (iii) be signed or electronically transmitted by the Survivor asserting the Sexual Abuse Claim or by an authorized agent or legal representative of the Survivor.
- c. Survivors who submit a Sexual Abuse Proof of Claim Form by mail and who wish to receive proof of receipt thereof must include an additional copy of their Sexual Abuse Proof of Claim Form and a self-addressed, stamped envelope.

12. The following “**Confidentiality Protocol**” with respect to the Sexual Abuse Claims shall apply:

- a. Survivors are directed not to file a Sexual Abuse Proof of Claim Form with the Court. Instead, the Sexual Abuse Proof of Claim Form must be: (i) submitted electronically using the interface available on the Claims Agent's website at: <https://omnimgt.com/usagymnastics/sexualabuseclaims>; or (ii) mailed or delivered to the Claims Agent at the following address: **USA Gymnastics Sexual Abuse Claims Processing, c/o Omni Management Group, 5955 DeSoto Avenue, Suite 100, Woodland Hills, California 91367.**
- b. Submitted Sexual Abuse Proof of Claim Forms will not be available to the general public unless the Survivor designates otherwise on the

Sexual Abuse Proof of Claim Form. The Confidentiality Protocol is for the benefit of the Survivors. Accordingly, Survivors may elect to make any of the information contained in their submitted Sexual Abuse Proof of Claim Form public.

- c. Sexual Abuse Proof of Claim Forms submitted by Survivors shall be held and treated as confidential by the Claims Agent, the Debtor, and the Debtor's counsel and upon request by the parties listed below (the "**Permitted Parties**"), subject to each Permitted Party, the Debtor, and its professionals executing and returning to the Debtor's counsel (with a copy to counsel to the Sexual Abuse Survivors' Committee) a confidentiality agreement substantially in the form attached hereto as Exhibit 6 (the "**Confidentiality Agreement**") by which they agree to keep the information provided in a Sexual Abuse Proof of Claim Form confidential.

13. The Permitted Parties include:³

- a. counsel to the Debtor retained pursuant to an order of the Bankruptcy Court;
- b. officers, directors, and employees of the Debtor necessary to assist the Debtor and its counsel in reviewing and analyzing the Sexual Abuse Claims;
- c. the Claims Agent;
- d. counsel for the Sexual Abuse Survivors' Committee;
- e. members of the Sexual Abuse Survivors' Committee and their personal counsel (after the Sexual Abuse Proof of Claim Form has been redacted to remove the Survivor's name, address, any other personally identifying information, responses to Question V.7(a), and the signature block);
- f. the United States Trustee;
- g. insurance companies (including their successors) that provided insurance that may cover the claims described in the Sexual Abuse Proof of Claim Forms, including authorized claim administrators of such insurance companies and their reinsurers and attorneys;

³ With the exception of counsel the Debtor retained pursuant to order of this Court, counsel to the Sexual Abuse Survivors' Committee, the United States Trustee's attorneys, and the Claims Agent, each Permitted Party receiving access to the Sexual Abuse Proof of Claim Forms (or any information aggregated or derived therefrom) must execute the Confidentiality Agreement.

- h. any future or unknown claims representative;
- i. any special arbitrator, mediator, or claims reviewer appointed to review and resolve the claims of Survivors;
- j. any trustee, or functional equivalent thereof, appointed to administer payments to Survivors;
- k. any person with the express written consent of the Debtor and the Sexual Abuse Survivors' Committee upon seven (7) business days' notice to Sexual Abuse Claimants; and,
- l. such other persons as the Court determines should have the information in order to evaluate Sexual Abuse Claims upon seven (7) business days' notice to Sexual Abuse Claimants.

14. In accordance with Bankruptcy Rule 3003(c)(2) and except as provided below, all persons and entities holding pre-petition claims, including, without limitation, the following entities, must file Proofs of Claim on or before the Bar Date applicable to their Claim:

- a. Any person or entity whose pre-petition claim against the Debtor is not listed in the Schedules or whose pre-petition claim is listed in the Schedules but is listed as disputed, contingent, or unliquidated and that desires to participate in this case or share in any distribution in this case;
- b. Any person or entity that believes that its pre-petition claim is improperly classified in the Schedules or is listed in an incorrect amount and that desires to have its claim allowed in a classification or amount other than that identified in the Schedules; and,
- c. Any Survivor who believes that he or she has a Sexual Abuse Claim, including but not limited to Survivors who have previously filed lawsuits or asserted claims against the Debtor, and Survivors who have never filed a lawsuit, asserted a claim against the Debtor, entered into a settlement, or reported their abuse.

15. The following persons or entities are not required to file a proof of claim on or before any applicable Bar Date:

- a. Any person or entity that has already properly filed a proof of claim against the Debtor with the Clerk of the Court for the United States Bankruptcy Court for the Southern District

of Indiana, or with the Claims Agent; *provided, however,* that a Survivor who previously filed a Sexual Abuse Claim on a standard proof of claim form (*e.g.*, Official Form 410) must re-file that Claim using the Sexual Abuse Proof of Claim Form on or before the Sexual Abuse Claims Bar Date for it to be timely filed; and *further provided,* that the Debtor shall give such Survivor prompt notice that the Survivor must re-file the Claim;

- b. Any person or entity: (i) whose claim is listed in the Schedules or any amendments thereto; and (ii) whose claim is not described therein as “disputed,” “contingent,” or “unliquidated;” and (iii) who does not dispute the amount or classification of its claim as set forth in the Schedules;
- c. Any person or entity that asserts an administrative expense claim against the Debtor pursuant to section 503(b) and section 507(a)(2) of the Bankruptcy Code; *provided, however,* that any person or entity asserting a claim entitled to administrative expense status under section 503(b)(9) of the Bankruptcy Code must assert such claim by filing a Proof of Claim on or prior to the General Bar Date.
- d. Any person or entity whose claim against the Debtor has been allowed by an order of the Court entered on or before the applicable Bar Date; and,
- e. Any person or entity whose claim has been paid in full; ***provided, however, this subsection does not include Survivors or others who were paid pursuant to settlement agreements but who believe they have additional claims against the Debtor beyond what was agreed to in the applicable settlement agreement.***

16. The Debtor shall retain the right to: (i) dispute, or assert offsets or defenses against, any filed claim or any claim listed or reflected in the Schedules as to nature, amount, liability, classification or otherwise; and (ii) subsequently designate any claim as disputed, contingent, or unliquidated.

17. Nothing contained herein shall constitute a waiver by the Debtor of (a) any defenses in connection with any claims that are asserted against it; or (b) the right to assert that any claims are barred by applicable statutes of limitations.

18. In accordance with Bankruptcy Rule 3003(c)(2), any person or entity that is required, but fails, to submit a Proof of Claim in accordance with this Bar Date Order on or before the applicable Bar Date will be forever barred, estopped, and enjoined from asserting such Claim—including any Sexual Abuse Claim—against the Debtor, and the Debtor and its property will be forever discharged from any and all indebtedness or liability with respect to or arising from that Claim. Moreover, such creditor will be prohibited from (a) voting on any chapter 11 plan filed in this chapter 11 case on account of such Claim, and (b) participating in any distribution in this chapter 11 case on account of such Claim.

19. The notice substantially in the form attached as Exhibit 3 hereto is approved and shall be deemed adequate and sufficient if served by first-class mail at least 60 days prior to the General Bar Date upon:

- a. the U.S. Trustee for the Southern District of Indiana;
- b. counsel to the Sexual Abuse Survivors' Committee;
- c. any persons or entities that have requested notice of the proceedings in this chapter 11 case pursuant to Bankruptcy Rule 2002;
- d. all persons or entities that have submitted Proofs of Claim against USAG;
- e. all known creditors and other known holders of potential Claims against USAG, including all persons or entities listed in the Schedules for which USAG has addresses;
- f. all parties to executory contracts and unexpired leases of USAG;
- g. all parties to litigation with USAG and their counsel (if known);
- h. the United States Olympic Committee;
- i. the United States Attorney for the Southern District of Indiana;
- j. the United States Attorney for the Western District of Michigan;
- k. the Internal Revenue Service for the Southern District of Indiana;

- l. the Indiana Attorney General's office;
- m. the Texas Attorney General's office;
- n. the Michigan Attorney General's office;
- o. the House Energy and Commerce Committee;
- p. the House Oversight and Government Reform Committee;
- q. the Senate Finance Committee;
- r. the Texas Rangers; and
- s. any additional persons and entities as deemed appropriate by USAG; ***provided, however, that the General Bar Date Notice Package will not be sent to Survivors, as Survivors will be sent the Sexual Abuse Claims Bar Date Notice Package.***

20. The notice substantially in the form attached hereto as Exhibit 4 is approved and shall be deemed adequate and sufficient if served by first-class mail at least 60 days prior to the Sexual Abuse Claims Bar Date upon known Survivors (to the extent a mailing address is reasonably available) and/or to counsel who have appeared for such known Survivors who:

- a. filed, or threatened to file, lawsuits against the Debtor, alleging they were abused;
- b. contacted the Debtor to report that they were survivors of abuse, whether or not the individual's claim was considered to be substantiated and regardless of whether the report was written or verbal;
- c. entered into a settlement agreement with the Debtor stemming from allegations of abuse; or,
- d. received payment from the Debtor as a result of an allegation of abuse.

21. Pursuant to Bankruptcy Rules 2002(f) and 2002(l), the Debtor shall publish a form of the General Bar Date Notice and the Sexual Abuse Claims Bar Date Notice, substantially in the form attached as Exhibit 5 hereto, on one occasion in USA Today (National Edition), at least 28

days prior to the General Bar Date and Sexual Abuse Claims Bar Date. The publication thereof is hereby approved and deemed good, adequate, and sufficient publication notice of the Bar Dates.

22. The Debtor shall also provide further notice of the Sexual Abuse Claims Bar Date by taking the following measures:

- a. Upon entry of the Bar Date Order, the Debtor will cause the Claims Agent to post component parts of the Sexual Abuse Claims Bar Date Notice Package on the case website at: <https://omningt.com/usagymnastics>.
- b. Upon entry of the Bar Date Order the Debtor will post the Sexual Abuse Claims Bar Date Notice Package on its website at: www.usagym.org, on its Facebook page at: <https://www.facebook.com/USAGymnastics/>, and on its Twitter feed at: <https://twitter.com/USAGym> (including “pinning” the notice to the Debtor’s Twitter page), and the Debtor will post the Publication Notice on its Instagram account.
- c. The Debtor will maintain a toll free number which may be used by Survivors to ask questions or obtain copies of the Sexual Abuse Claims Bar Date Notice Package or parts thereof.
- d. Within one week of the service of the Sexual Abuse Claims Bar Date Notice Package, the Debtor will mail or e-mail a copy of the Sexual Abuse Claims Bar Date Notice to each gymnasium or similar facility that is a member of, or affiliated with, USAG. The Debtor shall include in such mailing or e-mail a letter from USAG requesting that the gymnasium or facility give notice to its members of the Sexual Abuse Claims Bar Date Notice Package.
- e. The Debtor shall provide notice of the Sexual Abuse Claims Bar Date by publication on one occasion in USA Today (National Edition), at least 28 days prior to the Sexual Abuse Claims Bar Date.
- f. The Debtor shall request placement of the Sexual Abuse Claims Bar Date Notice on the Safesport website.
- g. The Debtor shall provide notice of the Sexual Abuse Claims Bar Date by publication on one occasion in one or more of the following at least 28 days prior to the Sexual Abuse Claims Bar Date: Gymcastics podcasts, Meetscores website, Inside Gymnastics, International Gymnastics, ESPN Women.
- h. The Debtor will send the Sexual Abuse Claims Bar Date Notice Package to the: the House Energy and Commerce Committee, the House Oversight and Government Reform Committee, the Senate Finance Committee, the Indiana Attorney General, the Texas Attorney General, the Michigan

Attorney General, the Texas Rangers, and the United States Attorney for the Western District of Michigan.

23. Any person or entity who desires to rely on the Schedules will have the responsibility for determining that such person's or entity's Claim is accurately listed in the Schedules.

24. The Claims Agent shall provide copies of Sexual Abuse Proofs of Claim to counsel to the Sexual Abuse Survivors' Committee (a) within 2 business days of the time it provides copies of such claims forms to the Debtor (including its counsel); or (b) within 2 business days of a request for such claims forms from counsel to the Sexual Abuse Survivors' Committee.

25. Notwithstanding anything to the contrary, the terms and conditions of this Order are immediately effective and enforceable upon its entry.

26. The Debtor and its Claims Agent are authorized to take all actions to effectuate the relief granted pursuant to this Bar Date Order.

27. Entry of this Order is without prejudice to the right of the Debtor to seek a further order of this Court fixing a date by which holders of claims not subject to the applicable Bar Dates established herein must file Proofs of Claim or be barred from doing so.

28. This Court shall retain jurisdiction to hear and determine all matters arising from or related to the implementation, interpretation and/or enforcement of this Order.

###

EXHIBIT 1

Personalized Proof of Claim Form

Debtor: **USA Gymnastics**

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF INDIANA

Case Number: **18-09108**

Your claim is scheduled as follows:
 Schedule: G (CONTRACT OR LEASE)
 Nature of Claim: Contract/Agreement

Official Form 410

Proof of Claim

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503. THIS FORM SHOULD NOT BE USED TO ASSERT A SEXUAL ABUSE CLAIM. FOR INFORMATION ON HOW TO ASSERT A SEXUAL ABUSE CLAIM, GO TO <https://omnimgt.com/USAGymnastics>

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. **Do not send original documents;** they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

Carefully read instructions included with this Proof of Claim before completing. In order to have your claim considered for payment and/or voting purposes, co applicable questions. The original of this Proof of Claim must be sent to: **USA Gymnastics, Omni Management Group, 5955 De Soto Avenue, Suite 100, Woodland Hills, CA 91367** by **MON DD, YYYY at X:00 pm** prevailing Eastern Time or **MON DD, YYYY at X:00 pm** prevailing Eastern time for governmental entities.

Part 1: Identify the Claim

1. Who is the current creditor?		<CREDITOR NAME> Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor _____	
2. Has this claim been acquired from someone else?		<input type="checkbox"/> No <input type="checkbox"/> Yes From whom? _____	
3. Where should notices and payments to the creditor be sent? Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)		Where should notices to the creditor be sent? <CREDITOR NAME> <ADDRESS1> <ADDRESS2> <ADDRESS3>	Where should payments to the creditor be sent? (if different) _____ Name _____ Number Street _____ City State ZIP Code _____ Contact Phone _____ Contact email _____ Uniform claim identifier for electronic payments in chapter 13 (if you use one) _____
4. Does this claim amend one already filed?		<input type="checkbox"/> No <input type="checkbox"/> Yes Claim Number on court claims registry (if known) _____ Filed On _____ MM / DD / YYYY	
5. Do you know if anyone else has filed a proof of claim for this claim?		<input type="checkbox"/> No <input type="checkbox"/> Yes Who made the earlier filing? _____	

Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	<input type="checkbox"/> No <input type="checkbox"/> Yes Last 4 digits of the debtor's account or any number you use to identify the debtor: _____
7. How much is the claim?	\$ _____ <div style="float: right; text-align: right;"> Does this amount include interest or other charges? <input type="checkbox"/> No <input type="checkbox"/> Yes Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A). </div>
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information _____
9. Is all or part of the claim secured?	<input type="checkbox"/> No <input type="checkbox"/> Yes The claim is secured by a lien on property Nature of property: <input type="checkbox"/> Real Estate If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: _____ Basis for perfection: _____ Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded). Value of Property: \$ _____ Amount of the claim that is secured: \$ _____ Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7). Amount necessary to cure any default as of the date of the petition: \$ _____ Annual Interest Rate: (when case was filed) _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable
10. Is this claim based on a lease?	<input type="checkbox"/> No <input type="checkbox"/> Yes Amount necessary to cure any default as of the date of the petition. \$ _____
11. Is this claim subject to a right of setoff?	<input type="checkbox"/> No <input type="checkbox"/> Yes Identify the property: _____
12. Is this claim for the value of goods received by the debtor 20 days before the commencement date of this case (11 U.S.C. §503(b)(9)).?	<input type="checkbox"/> No <input type="checkbox"/> Yes Amount of 503(b)(9) Claim: \$ _____

13. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?☐ No☐ Yes *Check all that apply***Amount entitled to priority**

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

\$ _____

☐ Up to \$2,850* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

\$ _____

☐ Wages, salaries, or commissions (up to \$12,850*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

\$ _____

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

\$ _____

☐ Contributions to an employee benefit plan 11 U.S.C. § 507(a)(5).

\$ _____

☐ Other. Specify subsection of 11 U.S.C. § 507(a)(____) that applies.

\$ _____

* Amounts are subject to adjustment on 4/01/19 and every 3 years after that for cases begun on or after the date of adjustment.

Part 3: Sign Below

The person completing this proof of claim must sign and date it.

FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

☐ I am the creditor.

☐ I am the creditor's attorney or authorized agent.

☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐ I am the guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date _____
MM / DD / YYYY

Signature

Print the name of the person who is completing and signing this claim:

Name

First Name

Middle Name

Last Name

Title

Company

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

Number Street

City

State

ZIP Code

Contact Phone

Email

NID 7021-16-S-0000

<CREDITOR NAME>

<ADDRESS1>

<ADDRESS2>

<ADDRESS3>

EXHIBIT 2

Sexual Abuse Proof of Claim Form

CONFIDENTIAL SUBJECT TO BANKRUPTCY COURT ORDER

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE SOUTHERN DISTRICT OF INDIANA
INDIANAPOLIS DIVISION**

In re:

USA GYMNASTICS,¹

Debtor.

Chapter 11

Case No. 18-09108-RLM-11

SEXUAL ABUSE PROOF OF CLAIM FORM

**THIS FORM MUST BE *RECEIVED* NO LATER THAN
APRIL 29, 2019 AT 4:00 P.M. (PREVAILING EASTERN TIME).**

**THIS PROOF OF CLAIM IS FOR SURVIVORS OF SEXUAL ABUSE ONLY. ANY PERSON
ASSERTING A CLAIM BASED ON ANYTHING OTHER THAN SEXUAL ABUSE (DEFINED
BELOW) MUST USE THE GENERAL PROOF OF CLAIM FORM (BANKRUPTCY FORM 410)**

**IF YOU HAVE GENERAL QUESTIONS REGARDING THIS FORM,
YOU MAY CALL 888-682-0360—DO NOT CALL THIS NUMBER FOR LEGAL ADVICE**

YOU MAY WISH TO CONSULT AN ATTORNEY REGARDING THIS MATTER

For purposes of this Sexual Abuse Proof of Claim Form, “**sexual abuse**” is defined as any and all acts or omissions that USA Gymnastics may be legally responsible for that arise out of, are based upon, or involve sexual conduct or misconduct, sexual abuse or molestation, sexual exploitation, indecent assault and/or battery, rape, pedophilia, ephebophilia, or sexually related psychological or emotional harm, humiliation, anguish, shock, sickness, disease, disability, dysfunction, or intimidation, or any other sexual misconduct or injury, or contacts or interactions of a sexual nature between an adult or child and a medical professional, coach, trainer, therapist, volunteer, or other authority figure affiliated with USA Gymnastics, or any current or former employee or volunteer of USA Gymnastics, or any other person for whose acts or failures USA Gymnastics is or was allegedly responsible, or the alleged failure by USA Gymnastics or its agents, employees, or volunteers to report the same. An adult or child may have been sexually abused whether or not this activity involved explicit force, whether or not this activity involved genital or other physical contact, and whether or not there was physical, psychological, or emotional harm to the adult or child.

Carefully read the instructions included with this Sexual Abuse Proof of Claim Form and complete ALL applicable questions. Please print clearly and use blue or black ink. You may submit the Sexual Abuse Proof of Claim Form: (a) electronically by filing the Sexual Abuse Proof of Claim Form at: <https://omnimgt.com/usagymnastics/sexualabuseclaims>; or (b) by first-class U.S. Mail, overnight mail, or other hand-delivery system at the following address: USA Gymnastics Sexual

¹ The last four digits of the Debtor's federal tax identification number 7871. The location of the Debtor's principal office is 130 E. Washington Street, Suite 700, Indianapolis, Indiana 46204.

Abuse Claims Processing, c/o Omni Management Group, 5955 DeSoto Avenue, Suite 100, Woodland Hills, California 91367.

TO BE VALID, YOU OR YOUR AUTHORIZED AGENT MUST SIGN THIS PROOF OF CLAIM. IF THE SEXUAL ABUSE SURVIVOR IS DECEASED OR INCAPACITATED, THE FORM MAY BE SIGNED BY THE SEXUAL ABUSE SURVIVOR'S REPRESENTATIVE OR THE ATTORNEY FOR THE ESTATE. IF THE SEXUAL ABUSE SURVIVOR IS A MINOR, THE FORM MAY BE SIGNED BY THE SEXUAL ABUSE SURVIVOR'S PARENT OR LEGAL GUARDIAN, OR THE SEXUAL ABUSE SURVIVOR'S ATTORNEY.

Penalty for presenting a fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

UNLESS YOU INDICATE OTHERWISE BELOW, YOUR IDENTITY WILL BE KEPT STRICTLY CONFIDENTIAL, UNDER SEAL, AND OUTSIDE THE PUBLIC RECORD. HOWEVER, INFORMATION IN THIS CLAIM WILL BE PROVIDED PURSUANT TO COURT-APPROVED GUIDELINES TO COUNSEL FOR THE ADDITIONAL TORT CLAIMANTS COMMITTEE OF SEXUAL ABUSE SURVIVORS, THE DEBTOR, ITS INSURERS, AND TO SUCH OTHER PERSONS AS THE COURT DETERMINES NEED THE INFORMATION IN ORDER TO EVALUATE THE CLAIM.

THIS SEXUAL ABUSE PROOF OF CLAIM (ALONG WITH ANY ACCOMPANYING EXHIBITS AND ATTACHMENTS) WILL BE MAINTAINED AS CONFIDENTIAL UNLESS YOU EXPRESSLY REQUEST THAT IT BE PUBLICLY AVAILABLE BY CHECKING THE BOX AND SIGNING BELOW.

- ☐ I do not want this Proof of Claim (along with any accompanying exhibits and attachments) to be kept confidential. Please verify this election by signing directly below.

Signature: _____

Print Name: _____

CONFIDENTIAL SUBJECT TO BANKRUPTCY COURT ORDER

SEXUAL ABUSE PROOF OF CLAIM FORM

“You” and/or “Claimant” refers to the person alleging that she/he was sexually abused or is otherwise asserting any claim related to the Claimant’s sexual abuse. If the person completing this form is not the person alleging that she/he was sexually abused, please provide the below information regarding the person alleging that she/he was sexually abused.

If you previously submitted a pre-mediation form (“Questionnaire”) to USA Gymnastics (USAG) attesting to your claim of sexual abuse, and if that Questionnaire contains complete and current information regarding any and all sexual abuse claims you assert against USAG, you may elect to attach that form to this Sexual Abuse Proof of Claim Form instead of completing the questions in Parts I-VI below, provided that you sign the certification at page 8 verifying the information provided on your Questionnaire. If you have not previously submitted a Questionnaire to USAG, if the information concerning your claim substantively differs from that in the prior Questionnaire response, if you allege that someone other than Nassar sexually abused you, or if you prefer not to attach a Questionnaire, you must complete the questions below.

If the space provided is not sufficient to record your response, please attach additional pages.

PART I—CLAIMANT IDENTIFYING INFORMATION:

Claimant’s Current Name:

Former Name(s) (if applicable):

Litigation Case Number, Court, and Alias (if applicable):

Claimant’s Date of Birth:

Claimant’s Place of Birth:

Claimant’s Current Address:

Name of Parents/Guardian (if Claimant is a minor):

Claimant’s Relationship To Individual Alleging She/He Was Abused (only applicable if the claimant submitting this form is not the individual alleging she/he was abused):

Parent: _____ Spouse: _____ Other: _____

Claimant's Counsel (if applicable):

Counsel's Address (if applicable):

Counsel's E-Mail Address and Phone Number (if applicable):

If the Claimant completing this form is not the person alleging that she/he was abused, but is claiming damages such as loss of consortium, please provide the identifying information below regarding the person who alleges that she/he was abused:

Current Name: Former Name(s) (if applicable):

Litigation Case Number, Court, and Alias (if applicable):

Date of Birth: Place of Birth:

Current Address:

PART II—NATURE OF COMPLAINT:

1. Were you sexually abused by Larry Nassar?

YES NO (circle one)

2. Were you sexually abused by a person(s) for whom you contend USAG is responsible other than Nassar (including, without limitation, a coach, trainer, therapist, volunteer or USAG employee)? **YES NO (circle one)**

- a. If yes, please provide the name of the person(s) who you allege sexually abused you and their role, title, and/or connection to USAG (this/these person(s) other than Nassar is referred to below as an "Other Abuser"):

3. When was the first time you were sexually abused by Nassar or the Other Abuser?

4. On how many separate occasions were you sexually abused by Nassar or the Other Abuser?

5. When and where did this sexual abuse occur? Please specify the location(s) (e.g., Michigan State University (MSU) Sports Medicine Clinic, Jenison Field House, Nassar's home, Twistars, meet/sporting event, USAG national competition, Karolyi Ranch) and the associated date(s). If you do not know the exact dates, please approximate the year or your age at the time.

6. To the extent you were sexually abused by Nassar or any Other Abuser, at one or more meets or sporting events, please list the name and location of the meet(s)/event(s) and state whether the meet(s)/event(s) involved MSU, a USAG affiliated gym or coach, or USAG.

7. If, during any incident of sexual abuse by Nassar or any Other Abuser,, any other person was in the room or nearby, please provide the name(s) of such person(s) and their relationship to you:

8. Aside from your attorneys, did you, or your parent, or legal guardian tell anyone about the sexual abuse by Nassar or any Other Abuser? **YES NO (circle one)**

- a. If yes, please list the names of all persons told, the approximate date on which you told them, their relationship to you, a USAG affiliated coach or gym, or USA Gymnastics (if any), and describe, in detail, what you told them?

- b. If you know, what did these people do in response when you told them about the sexual abuse?
-

9. Did you, or your parent, or legal guardian report to anyone the sexual abuse of Nassar or any Other Abuser? **YES NO (circle one)**

- a. If yes, please list the names of all persons to whom you, your parent, or legal guardian reported the sexual abuse by Nassar or any Other Abuser,, and their connection to a USAG affiliated gym or coach, or USAG (if any), the approximate date of the report, and describe in detail what was reported:
-

- b. If you know, what did these people do in response when you told them about the sexual abuse?
-

10. When and how did you first discover that Nassar or any Other Abuser, sexually abused you?
-

11. Please describe in your own words what Nassar, or any Other Abuser did that forms the basis of your claims:
-

PART III—CONTACT WITH LARRY NASSAR

If you do not allege that Nassar sexually abused you, you do not need to complete this Part III.

1. Were you seen by Nassar for purported medical treatment? **YES NO (circle one)**
 - a. If yes, please state when you began seeing Nassar for purported medical treatment and when you stopped seeing Nassar for purported medical treatment.

 - b. If yes, please state the approximate number of times you saw Nassar for purported medical treatment during which he sexually abused you.

2. Did someone refer you to Nassar? **YES NO (circle one)**
 - a. If yes, please list the name of each person who referred you to Nassar, their relationship to you, and if applicable, their connection to USAG, MSU, or Twistars.

PART IV—CONNECTIONS TO USA GYMNASTICS AND MICHIGAN STATE UNIVERSITY

1. Have you ever trained at a USAG member gym(s)? **YES NO (circle one)**
 - a. If yes, please provide the name of the USAG gym and dates of training:

2. Have you ever trained with a USAG member coach(es)? **YES NO (circle one)**
 - a. If yes, please provide the name of the USAG member coach(es) and the dates of training with the USAG member coach:

3. Have you ever been a member of USAG? **YES NO (circle one)**
 - a. If yes, please provide your dates of membership:

4. Have you ever been a USAG national team member? **YES NO (circle one)**
 - a. If yes, please provide your dates of membership:

5. Have you ever participated in a national competition, such as the U.S. National, U.S. Classic, or American Classic? **YES NO (circle one)**

a. If yes, please provide the dates of your participation:

6. Have you ever attended a training camp or other event at the former National Team Training Center (Karolyi Ranch)? **YES NO (circle one)**

a. If yes, please provide the dates of attendance:

7. Have you ever been a student at MSU? **YES NO (circle one)**

a. If yes, please provide your dates of attendance and date of graduation, if applicable:

8. Do you have any past or present connection to MSU, including but not limited to participation in a MSU-sponsored program? **YES NO (circle one)**

a. If yes, please describe, including the name, location, and date of any such program:

PART V—DAMAGES:

1. To date, have you sought medical treatment as a result of sexual abuse by Nassar or any Other Abuser? **YES NO (circle one)**

a. If yes, please describe, including approximate dates of treatment, name of treating physician, diagnosis, treatment plan, and medical expenses incurred to date:

2. To date, have you sought mental health treatment or counseling as a result of sexual abuse by Nassar or any Other Abuser? **YES NO (circle one)**

a. If yes, please describe, including approximate dates of treatment, name of treating physician, diagnosis, treatment plan, and medical expenses incurred to date:

3. Please describe any other damage you have suffered to date as a result of sexual abuse by Nassar or any Other Abuser:
-

4. Have you ever received mental health treatment for reasons unrelated to the sexual abuse by Nassar or the Other Abuser? **YES NO (circle one)**

a. If yes, please describe, including approximate dates of treatment, location of treatment, name of treating mental health professional, and diagnosis:

5. Are you the survivor of sexual abuse unrelated to Nassar or the Other Abuser? **YES NO (circle one)**

a. If yes, please describe the abuse and the date(s) of the abuse:

6. Have you commenced any lawsuit seeking damages stemming from the sexual abuse described in this Sexual Abuse Proof of Claim Form? **YES NO (circle one)**

a. If yes, please provide a copy of the complaint you filed and/or provide the case number of the lawsuit and state the court in which the lawsuit is pending:

7. Have you received a settlement or judgment for any claims associated with the sexual abuse described in this Sexual Abuse Proof of Claim Form? **YES NO (circle one)**

a. If yes, please provide a copy of the settlement or judgment and state: (1) the amount of the settlement; and (2) if the settlement was pre-litigation, the name of the entity(ies) being released by the settlement:

PART VI—CLAIMANT BACKGROUND INFORMATION:

If Claimant does not seek damages for loss of income, Claimant does not need to complete these questions.

1. Please provide your educational history (list all schools attended, degrees obtained, and date(s) of graduation:

2. Please state your current employer, position, salary, and length of time with which Claimant has held that position:

3. Please provide your work history, including all former places of employment, positions held, and approximate dates of employment:

CERTIFICATION:

Pursuant to 28 U.S.C. §1746, I certify under penalty of perjury that the foregoing (or, to the extent I submitted a pre-mediation form, the information on that form) is true and correct to the best of my knowledge and recollection.

Dated: _____

Signed: _____

Print Name: _____

EXHIBIT 3

General Bar Date Notice

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE SOUTHERN DISTRICT OF INDIANA
INDIANAPOLIS DIVISION**

In re:

USA GYMNASTICS,

Debtor.

Chapter 11

Case No. 18-09108-RLM-11

NOTICE OF BAR DATES FOR FILING GENERAL CLAIMS

TO ALL ENTITIES WITH CLAIMS AGAINST USA GYMNASTICS:

PLEASE TAKE NOTICE that on December 5, 2018 (the “**Petition Date**”) USA Gymnastics, debtor and debtor in possession in the above-captioned case (the “**Debtor**”), filed a voluntary petition for relief under chapter 11 of title 11 of the United States Code (the “**Bankruptcy Code**”) in the United States Bankruptcy Court for the Southern District of Indiana (the “**Court**”). The Debtor, its address, case number, proof of claim forms, and other relevant information related to this chapter 11 case may be obtained at: <https://omnimgt.com/usagymnastics>.

PLEASE TAKE FURTHER NOTICE that on February 25, 2019, the Court entered an order (the “**Bar Date Order**”) establishing certain claims bar dates in the Debtor’s chapter 11 case. By the Bar Date Order, the Court established **April 29, 2019 at 4:00 p.m. (prevailing Eastern Time)**, as the date by which general claims must be filed (the “**General Bar Date**”) and the date by which claims for sexual abuse must be filed (the “**Sexual Abuse Claims Bar Date**”). As described below, the Bar Date Order requires all Entities that have or assert any pre-petition Claims against the Debtor to file proofs of claim with Omni Management Group, the Court-appointed claims and noticing agent in this case (the “**Claims Agent**”), so that their proofs of claim are received by the Claims Agent on or before 4:00 p.m. (prevailing Eastern Time) on the applicable bar date set forth herein. Please note that relevant terms, including “Entity,” “Claim,” and “Sexual Abuse Claim,” are defined below.

PLEASE TAKE FURTHER NOTICE that for your convenience, enclosed with this notice (the “**General Bar Date Notice**”) is a proof of claim form (the “**Personalized Proof of Claim Form**”). If this notice does not include a proof of claim form, a proof of claim form may be obtained from the Claims Agent at: <https://omnimgt.com/usagymnastics>.

PLEASE TAKE FURTHER NOTICE that the procedures described in this Notice shall not apply to Survivors asserting Sexual Abuse Claims. Survivors asserting Sexual Abuse Claims should consult the *Notice of Bar Date for Filing Sexual Abuse Claims*. A Survivor with a claim other than a Sexual Abuse Claim must file a separate proof of claim as set forth in the Bar Date Order and this Notice.

PLEASE TAKE FURTHER NOTICE that any claimants filing Claims other than Sexual Abuse Claims, including tort claims not arising from sexual abuse (*e.g.*, emotional abuse or non-sexual physical abuse), shall comply with the procedures set forth in this Notice and submit their Claims on the Personalized Proof of Claim Form or Bankruptcy Form 410.

PLEASE TAKE FURTHER NOTICE that you should consult an attorney if you have any questions, including whether you should file a proof of claim. You may also obtain information, but not legal advice, from the Claims Agent by calling 1-888-682-0360 or visiting: <https://omnimgt.com/usagymnastics>.

KEY DEFINITIONS

- As used in this Notice, the term “**Entity**” has the meaning given to it in section 101(15) of the Bankruptcy Code, and includes all persons (individuals, partnerships, and corporations), estates, trusts, Governmental Units, and the United States Trustee.
- As used in this Notice, the term “**Governmental Unit**” has the meaning given to it in section 101(27) of the Bankruptcy Code and includes the United States, States, commonwealths, districts, territories, municipalities, foreign states, or departments, agencies, or instrumentalities of the foregoing.
- As used in this Notice, the term “**Claim**” shall mean, as to or against the Debtor and in accordance with section 101(5) of the Bankruptcy Code: (i) any right to payment, whether or not such right is reduced to judgment, liquidated, unliquidated, fixed, contingent, matured, unmatured, disputed, undisputed, legal, equitable, secured, or unsecured; or (ii) any right to an equitable remedy for breach of performance if such breach gives rise to a right to payment, whether or not such right to an equitable remedy is reduced to judgment, fixed, contingent, matured, unmatured, disputed, undisputed, secured, or unsecured.
- As used in this Notice, the term “**Schedules**” refers to the Schedules of Assets and Liabilities and/or Statement of Financial Affairs the Debtor filed in its chapter 11 case.
- As used in this Notice, the term “**Sexual Abuse Claim**” shall mean a claim regarding any and all acts or omissions that the Debtor may be legally responsible for that arise out of, are based upon, or involve sexual conduct or misconduct, sexual abuse or molestation, sexual exploitation, indecent assault and/or battery, rape, pedophilia, ephebophilia, or sexually related psychological or emotional harm, humiliation, anguish, shock, sickness, disease, disability, dysfunction, or intimidation, or any other sexual misconduct or injury, or contacts or interactions of a sexual nature between an adult or child and a medical professional, coach, trainer, therapist, volunteer, or other authority figure affiliated with the Debtor, or any current or former employee or volunteer of the Debtor, or any other person for whose acts or failures the Debtor is or was allegedly responsible, or the alleged failure by the Debtor or its agents, employees, or volunteers to report the same. An adult or child may have been sexually abused whether or not this activity involved explicit force, whether or not this activity involved genital or other physical contact, and whether or not there was physical, psychological, or emotional harm to the adult or child.

- As used in this Notice, the term “**Survivor**” shall mean any person holding a pre-petition claim arising from sexual abuse for which the individual believes that the Debtor may be liable.

THE BAR DATES

The Bar Date Order establishes the following applicable bar dates for filing proofs of claim in this case:

- **General Bar Date.** Except as otherwise set forth below, pursuant to the Bar Date Order, all entities, other than Survivors asserting Sexual Abuse Claims, must submit Proofs of Claim asserting claims that arose on or before the Petition Date against USAG in this chapter 11 case by the General Bar Date—**April 29, 2019 at 4:00 p.m. (prevailing Eastern time)**.
- **Sexual Abuse Claims Bar Date.** Pursuant to the Bar Date Order, all Survivors asserting Sexual Abuse Claims that arose on or before the Petition Date against USAG in this chapter 11 case must submit Proofs of Claim by the Sexual Abuse Claims Bar Date—**April 29, 2019 at 4:00 p.m. (prevailing Eastern time)**.
- **Governmental Bar Date.** Pursuant to the Bar Date Order, all Governmental Units must submit Proofs of Claim asserting claims that arose on or before the Petition Date against USAG in this chapter 11 case by the Governmental Bar Date— **June 3, 2019 at 4:00 p.m. (prevailing Eastern time)**.
- **Amended Schedules Bar Date.** In the event the Debtor amends or supplements its Schedules, the Debtor shall give notice of any such amendment to the holders of any Claim affected thereby, and such holders shall be entitled to file amended or original proofs of claim to take into account the amendment(s) to the Schedules, but they must do so on or before the later of: (a) the General Bar Date; or (b) 30 days after the holder of a claim is served with notice that the Debtor amended its Schedules to identify, reduce, delete, or change the amount, priority, classification, or other status of such a claim.
- **Rejection Bar Date.** Any person or entity that holds a Claim arising from the rejection of an executory contract or unexpired lease must submit a Proof of Claim based on such rejection on or before the later of: (a) the General Bar Date; or (b) any date this Court may fix in the applicable order authorizing such rejection or, if no such date is provided, 30 days from the date of entry of such order.

WHO MUST SUBMIT A PROOF OF CLAIM

The Bar Date Order provides that all Entities holding pre-petition claims, including, without limitation, the following entities, must file Proofs of Claim on or before the applicable Bar Date:

- Any person or entity whose pre-petition claim against the Debtor is not listed in the

Debtor's Schedules or whose pre-petition claim is listed in the Schedules but is listed as disputed, contingent, or unliquidated and that desires to participate in this case or share in any distribution in this case;

- Any person or entity that believes that its pre-petition claim is improperly classified in the Schedules or is listed in an incorrect amount and that desires to have its claim allowed in a classification or amount other than that identified in the Schedules.

Pursuant to the Bar Date Order, the following entities are not required to file a proof of claim on or before the applicable Bar Date:

- Any person or entity that has already properly filed a proof of claim against the Debtor with the Clerk of the Court for the United States Bankruptcy Court for the Southern District of Indiana, or with the Claims Agent; provided, however, that a Survivor who previously filed a Sexual Abuse Claim on a standard proof of claim form (*e.g.*, Official Form 410) must re-file that Claim using the proper form described in the *Notice of Bar Date for Filing Sexual Abuse Claims* for it to be timely filed.
- Any person or entity: (i) whose claim is listed in the Schedules or any amendments thereto; and (ii) whose claim is not described therein as "disputed," "contingent," or "unliquidated"; and (iii) who does not dispute the amount or classification of its claim as set forth in the Schedules.
- Any person or entity that asserts an administrative expense claim against the Debtor pursuant to section 503(b) and section 507(a)(2) of the Bankruptcy Code; *provided, however*, that any person or entity asserting a claim entitled to administrative expense status under section 503(b)(9) of the Bankruptcy Code must assert such claim by filing a Proof of Claim on or before the General Bar Date.
- Any person or entity whose claim against the Debtor has been allowed by an order of the Court entered on or before the applicable Bar Date; and,
- Any person or entity whose claim has been paid in full.

PROCEDURES FOR FILING PROOFS OF CLAIM

The Debtor is enclosing a Personalized Proof of Claim Form for use in this case. If your Claim is scheduled by the Debtor, the form also sets forth the amount of your Claim as scheduled by the Debtor, and whether the Claim is scheduled as disputed, contingent, or unliquidated. You will receive a different Proof of Claim form for each Claim scheduled in your name by the Debtor. You may utilize the Personalized Proof of Claim Form(s) provided by the Debtor to submit your Claim, or you may submit your Claim on Official Bankruptcy Form 410.

Your Proof of Claim must not contain complete social security numbers or taxpayer identification numbers (only the last four digits), a complete birth date (only the year), the name of a minor (only the minor's initials) or a financial account number (only the last four digits of such financial account).

Additional proof of claim forms may be obtained by contacting the Claims Agent, by calling 1-888-682-0360 and/or visiting the Claims Agent's website at: <https://omnimgt.com/usagymnastics>.

The following procedures for the submission of Proofs of Claim against the Debtor in this chapter 11 case shall apply:

- Each Personalized Proof of Claim Form or Official Bankruptcy Form 410 must be submitted so as to actually be received by the Claims Agent on or before the applicable Bar Date either by: (i) the interface available on the Claims Agent's website at <https://omnimgt.com/usagymnastics>; or (ii) first-class U.S. Mail, overnight mail, or another hand-delivery system at the following address: USA Gymnastics Claims Processing, c/o Omni Management Group, 5955 DeSoto Avenue, Suite 100, Woodland Hills, California 91367;
- **PROOFS OF CLAIM SUBMITTED BY FACSIMILE OR ELECTRONIC MAIL WILL NOT BE ACCEPTED AND WILL NOT BE DEEMED TIMELY SUBMITTED.**
- Each Proof of Claim must: (i) be written in English; (ii) include a Claim amount denominated in United States dollars; (iii) conform substantially with the Personalized Proof of Claim Form provided by the Debtor or Official Form 410; (iv) be signed or electronically transmitted, through the interface available on the Claims Agent's website at <https://omnimgt.com/usagymnastics>, by the claimant or by an authorized agent or legal representative of the claimant; and (v) unless otherwise consented to by the Debtor in writing, include supporting documentation unless voluminous, in which case a summary must be attached or an explanation provided as to why documentation is not available.
- Parties who submit a Proof of Claim by mail and who wish to receive proof of receipt thereof must include an additional copy of their Proof of Claim and a self-addressed, stamped envelope.

THE DEBTOR'S SCHEDULES AND ACCESS THERETO

As described above, you may be listed as the holder of a Claim against the Debtor in the Debtor's Schedules. Copies of the Debtor's Schedules are available from the Claims Agent at: <https://omnimgt.com/usagymnastics>.

To determine if and how you are listed on the Schedules, please refer to the descriptions set forth on the enclosed Personalized Proof of Claim Form(s) regarding the nature, amount, and classification of your Claim(s).

If you rely on the Debtor's Schedules, it is your responsibility to determine that the Claim is accurately listed in the Schedules. If it is unclear from the Schedules whether your Claim is disputed, contingent, or unliquidated as to amount or if it is otherwise properly listed and classified, you must file a proof of claim on or before the applicable Bar Date in accordance with the procedures set forth in this notice.

RESERVATION OF RIGHTS

Nothing contained in this Notice is intended, or should be construed, as a waiver of the Debtor's right to object to any claim or proof of claim on any ground, including, but not limited to, the passing of the applicable statutes of limitations. The Debtor reserves its right to dispute, or to assert offsets or defenses to, any claim reflected on the Schedules, or any amendments thereto, as to amount, liability, classification, or otherwise, and to subsequently designate any claim as disputed, contingent, unliquidated, or undetermined.

CONSEQUENCES OF FAILURE TO TIMELY SUBMIT A PROOF OF CLAIM

ANY ENTITY THAT IS REQUIRED, BUT FAILS, TO SUBMIT A PROOF OF CLAIM IN ACCORDANCE WITH THE BAR DATE ORDER ON OR BEFORE THE APPLICABLE BAR DATE WILL BE FOREVER BARRED, ESTOPPED, AND ENJOINED FROM ASSERTING SUCH CLAIM—INCLUDING ANY SEXUAL ABUSE CLAIM—AGAINST THE DEBTOR, AND THE DEBTOR AND ITS PROPERTY WILL BE FOREVER DISCHARGED FROM ANY AND ALL INDEBTEDNESS OR LIABILITY WITH RESPECT TO OR ARISING FROM THAT CLAIM. MOREOVER, SUCH CREDITOR WILL BE PROHIBITED FROM (A) VOTING ON ANY CHAPTER 11 PLAN FILED IN THIS CHAPTER 11 CASE ON ACCOUNT OF SUCH CLAIM, AND (B) PARTICIPATING IN ANY DISTRIBUTION IN THIS CHAPTER 11 CASE ON ACCOUNT OF SUCH CLAIM.

Dated: February 25, 2019

JENNER & BLOCK LLP

By: /s/ Catherine L. Steege

Catherine L. Steege (admitted *pro hac vice*)
Dean N. Panos (admitted *pro hac vice*)
Melissa M. Root (#24230-49)
353 N. Clark Street
Chicago, Illinois 60654
Tel: (312) 923-2952
Fax: (312) 840-7352

csteege@jenner.com
dpanos@jenner.com
mroot@jenner.com

Counsel for the Debtor

EXHIBIT 4

Sexual Abuse Claims Bar Date Notice

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE SOUTHERN DISTRICT OF INDIANA
INDIANAPOLIS DIVISION**

In re:

USA GYMNASTICS,

Debtor.

Chapter 11

Case No. 18-09108-RLM-11

NOTICE OF BAR DATE FOR FILING SEXUAL ABUSE CLAIMS

TO SEXUAL ABUSE SURVIVORS WITH CLAIMS AGAINST USA GYMNASTICS:

PLEASE TAKE NOTICE that on December 5, 2018 (the “**Petition Date**”) USA Gymnastics, debtor and debtor in possession in the above-captioned case (the “**Debtor**”), filed a voluntary petition for relief under chapter 11 of title 11 of the United States Code (the “**Bankruptcy Code**”) in the United States Bankruptcy Court for the Southern District of Indiana (the “**Court**”). The Debtor, its address, case number, proof of claim forms, and other relevant information related to this chapter 11 case may be obtained at: <https://omnimgt.com/usagymnastics>.

PLEASE TAKE FURTHER NOTICE that on February 25, 2019, the Court entered an order (the “**Bar Date Order**”) establishing certain claims bar dates in the Debtor’s chapter 11 case. By the Bar Date Order, the Court established **April 29, 2019 at 4:00 p.m. (prevailing Eastern Time)**, as the date by which Sexual Abuse Claims must be filed the (“**Sexual Abuse Claims Bar Date**”). The Bar Date Order requires that Survivors holding pre-petition claims arising from sexual abuse for which they believe the Debtor may be liable must file proofs of claim with Omni Management Group, the Court-appointed claims and noticing agent in this case (the “**Claims Agent**”), so that their proofs of claim are received by the Claims Agent on or before the Sexual Abuse Claims Bar Date. Please note that relevant terms, including “Survivor,” “Claim,” and “Sexual Abuse Claim” are defined below.

PLEASE TAKE FURTHER NOTICE that for your convenience, enclosed with this notice is a proof of claim form (the “**Sexual Abuse Proof of Claim Form**”). Sexual Abuse Claims must be submitted on the Sexual Abuse Proof of Claim Form. If this notice does not include a Sexual Abuse Proof of Claim Form, a copy may be obtained from the Claims Agent at: <https://omnimgt.com/usagymnastics/sexualabuseclaims>.

PLEASE TAKE FURTHER NOTICE that if you have a pre-petition claim against the Debtor for anything other than a Sexual Abuse Claim, you must file a separate proof of claim asserting that claim. Tort claims that do not arise from sexual abuse (*e.g.*, emotional abuse or non-sexual physical abuse) must not be filed using the Sexual Abuse Proof of Claim Form. Information regarding the General Bar Date and proof of claim forms are available at: <https://omnimgt.com/usagymnastics>.

PLEASE TAKE FURTHER NOTICE that a **Survivor** should consult an attorney if the Survivor has any questions, including whether such Survivor must file a Sexual Abuse Claim. A Survivor may also obtain information, but not legal advice, from the Claims Agent by calling 1-888-682-0360 or visiting: <https://omningt.com/usagymnastics/sexualabuseclaims>.

KEY DEFINITIONS

- As used in this Notice, the term “**Survivor**” shall mean any person holding a pre-petition claim arising from sexual abuse for which the individual believes that the Debtor may be liable.
- As used in this Notice, the term “**Claim**” shall mean, as to or against the Debtor and in accordance with section 101(5) of the Bankruptcy Code: (i) any right to payment, whether or not such right is reduced to judgment, liquidated, unliquidated, fixed, contingent, matured, unmatured, disputed, undisputed, legal, equitable, secured, or unsecured; or (ii) any right to an equitable remedy for breach of performance if such breach gives rise to a right to payment, whether or not such right to an equitable remedy is reduced to judgment, fixed, contingent, matured, unmatured, disputed, undisputed, secured, or unsecured.
- As used in this Notice, the term “**Sexual Abuse Claim**,” shall mean a Claim regarding any and all acts or omissions that the Debtor may be legally responsible for that arise out of, are based upon, or involve sexual conduct or misconduct, sexual abuse or molestation, sexual exploitation, indecent assault and/or battery, rape, pedophilia, ephebophilia, or sexually related psychological or emotional harm, humiliation, anguish, shock, sickness, disease, disability, dysfunction, or intimidation, or any other sexual misconduct or injury, or contacts or interactions of a sexual nature between an adult or child and a medical professional, coach, trainer, therapist, volunteer, or other authority figure affiliated with the Debtor, or any current or former employee or volunteer of the Debtor, or any other person for whose acts or failures the Debtor is or was allegedly responsible, or the alleged failure by the Debtor or its agents, employees, or volunteers to report the same. An adult or child may have been sexually abused whether or not this activity involved explicit force, whether or not this activity involved genital or other physical contact, and whether or not there was physical, psychological, or emotional harm to the adult or child.

THE SEXUAL ABUSE CLAIMS BAR DATE

The Bar Date Order establishes the following bar date for filing Sexual Abuse Claims in this case:

- **Sexual Abuse Claims Bar Date.** Pursuant to the Bar Date Order, all Survivors must submit Proofs of Claim asserting Sexual Abuse Claims that arose on or before the Petition Date against USAG in this chapter 11 case by **April 29, 2019 at 4:00 p.m. (prevailing Eastern time)**.

WHO MUST SUBMIT A PROOF OF CLAIM

The Bar Date Order provides that all Survivors holding Sexual Abuse Claims, including, without limitation, the following, must file Proofs of Claim on or before the Sexual Abuse Claims Bar Date:

- Any Survivor who believes that he or she has a Sexual Abuse Claim, including but not limited to Survivors who have previously filed lawsuits or asserted claims against the Debtor, and Survivors who have never filed a lawsuit, asserted a claim against the Debtor, entered into a settlement, or reported their abuse;
- Any Survivor who previously filed a Sexual Abuse Claim on a standard proof of claim form (e.g., Official Form 410), because they must re-file that Claim and utilize the Sexual Abuse Proof of Claim Form; and,
- Any Survivors who were paid pursuant to settlement agreements with the Debtor but who believe they have additional claims against the Debtor beyond what was agreed to in the applicable settlement agreement.

PROCEDURES FOR FILING PROOFS OF CLAIM

The Debtor is enclosing a Sexual Abuse Proof of Claim Form for use in this case. **This Sexual Abuse Proof of Claim Form must be used in order for a Sexual Abuse Claim to be properly filed.**

Your Sexual Abuse Proof of Claim Form must not contain complete social security numbers or taxpayer identification numbers (only the last four digits), a complete birth date (only the year), the name of a minor (only the minor's initials) or a financial account number (only the last four digits of such financial account).

Additional Sexual Abuse Proof of Claim Forms may be obtained by contacting the Claims Agent, by calling 1-888-682-0360 and/or visiting the Claims Agent's website at: <https://omnimgt.com/usagymnastics/sexualabuseclaims>.

The Bar Date Order provides that the following procedures for the submission of Sexual Abuse Claims against the Debtor in this chapter 11 case shall apply:

- Each Sexual Abuse Proof of Claim Form, including any supporting documentation, must be submitted so as to actually be received by the Claims Agent on or before the Sexual Abuse Claims Bar Date by: (a) the interface available on the Claims Agent's website at <https://omnimgt.com/usagymnastics/sexualabuseclaims>; or (b) first-class U.S. Mail, overnight mail, or hand-delivery at the following address: USA Gymnastics Sexual Abuse Claims Processing, c/o Omni Management Group, 5955 DeSoto Avenue, Suite 100, Woodland Hills, California 91367;
- **SEXUAL ABUSE PROOF OF CLAIM FORMS SUBMITTED BY FACSIMILE OR ELECTRONIC MAIL WILL NOT BE ACCEPTED AND WILL NOT BE DEEMED TIMELY SUBMITTED;**

- Each Sexual Abuse Proof of Claim Form must: (i) be written in English; (ii) conform substantially with the Sexual Abuse Proof of Claim Form provided by the Debtor; and (iii) be signed or electronically transmitted by the Survivor asserting the Sexual Abuse Claim or by an authorized agent or legal representative of the Survivor;
- Survivors who submit a Sexual Abuse Proof of Claim Form by mail and who wish to receive proof of receipt thereof must include an additional copy of their Sexual Abuse Proof of Claim Form and a self-addressed, stamped envelope.

The Bar Order further provides that a Confidentiality Protocol shall govern the submission of the Sexual Abuse Claims:

- Survivors are directed not to file a Sexual Abuse Proof of Claim Form with the Court. Instead, the Sexual Abuse Proof of Claim Form must be: (a) submitted electronically using the interface available on the Claims Agent's website at <https://omnimgt.com/usagymnastics/sexualabuseclaims>; or (b) mailed or delivered to the Claims Agent at the following address: USA Gymnastics Sexual Abuse Claims Processing, c/o Omni Management Group, 5955 DeSoto Avenue, Suite 100, Woodland Hills, California 91367;
- Submitted Sexual Abuse Proof of Claim Forms will not be available to the general public unless the Survivor designates otherwise on the Sexual Abuse Proof of Claim Form. The Confidentiality Protocol is for the benefit of the Survivors. Accordingly, Survivors may elect to make any of the information contained in a submitted Sexual Abuse Proof of Claim Form public.
- Sexual Abuse Proof of Claim Forms submitted by Survivors shall be held and treated as confidential by the Claims Agent, the Debtor, and the Debtor's counsel and upon request by the parties listed below (the "**Permitted Parties**"), subject to each Permitted Party, the Debtor, and its professionals executing and returning to the Debtor's counsel (with a copy to counsel to the Sexual Abuse Survivors' Committee) a confidentiality agreement (the "**Confidentiality Agreement**") by which they agree to keep the information provided in a Sexual Abuse Proof of Claim Form confidential.

The Bar Date Order further provides that the Permitted Parties under the Confidentiality Protocol include:¹

- counsel to the Debtor retained pursuant to an order of the Bankruptcy Court;
- officers, directors, and employees of the Debtor necessary to assist the Debtor and its counsel in reviewing and analyzing the Sexual Abuse Claims;

¹ With the exception of counsel the Debtor retained pursuant to order of this Court, counsel to the Sexual Abuse Survivors' Committee, the United States Trustee's attorneys, and the Claims Agent, each Permitted Party receiving access to the Sexual Abuse Proof of Claim Forms (or any information aggregated or derived therefrom) must execute the Confidentiality Agreement.

- the Claims Agent;
- counsel for the Sexual Abuse Survivors' Committee;
- members of the Sexual Abuse Survivors' Committee and their personal counsel (after the Sexual Abuse Proof of Claim Form has been redacted to remove the Survivor's name, address, any other personally identifying information, responses to Question V.7(a), and the signature block);
- the United States Trustee;
- insurance companies (including their successors) that provided insurance that may cover the claims described in the Sexual Abuse Proof of Claim Forms, including authorized claim administrators of such insurance companies and their reinsurers and attorneys;
- any future or unknown claims representative;
- any special arbitrator, mediator, or claims reviewer appointed to review and resolve the claims of Survivors;
- any trustee, or functional equivalent thereof, appointed to administer payments to Survivors;
- any person with the express written consent of the Debtor and the Sexual Abuse Survivors' Committee upon seven (7) business days' notice to Sexual Abuse Claimants; and,
- such other persons as the Court determines should have the information in order to evaluate Sexual Abuse Claims upon seven (7) business days' notice to Sexual Abuse Claimants.

RESERVATION OF RIGHTS

Nothing contained in this Notice is intended, or should be construed, as a waiver of the Debtor's right to object to any claim or proof of claim on any ground, including, but not limited to, the passing of the applicable statutes of limitations. The Debtor reserves it right to dispute, or to assert offsets or defenses to, any claim reflected on the Schedules, or any amendments thereto, as to amount, liability, classification, or otherwise, and to subsequently designate any claim as disputed, contingent, unliquidated, or undetermined.

CONSEQUENCES OF FAILURE TO TIMELY SUBMIT A PROOF OF CLAIM

ANY SURVIVOR THAT IS REQUIRED BUT FAILS, TO SUBMIT A PROOF OF CLAIM IN ACCORDANCE WITH THE BAR DATE ORDER ON OR BEFORE THE SEXUAL ABUSE CLAIMS BAR DATE WILL BE FOREVER BARRED, ESTOPPED, AND ENJOINED FROM ASSERTING SUCH SEXUAL ABUSE CLAIM AGAINST THE DEBTOR, AND THE DEBTOR AND ITS PROPERTY WILL BE FOREVER DISCHARGED FROM ANY AND ALL INDEBTEDNESS OR LIABILITY WITH RESPECT TO OR ARISING FROM THAT SEXUAL ABUSE CLAIM. MOREOVER,

SUCH SURVIVOR WILL BE PROHIBITED FROM (A) VOTING ON ANY CHAPTER 11 PLAN FILED IN THIS CHAPTER 11 CASE ON ACCOUNT OF SUCH SEXUAL ABUSE CLAIM, AND (B) PARTICIPATING IN ANY DISTRIBUTION IN THIS CHAPTER 11 CASE ON ACCOUNT OF SUCH SEXUAL ABUSE CLAIM.

Dated: February 25, 2019

JENNER & BLOCK LLP

By: /s/ Catherine L. Steege

Catherine L. Steege (admitted *pro hac vice*)

Dean N. Panos (admitted *pro hac vice*)

Melissa M. Root (#24230-49)

353 N. Clark Street

Chicago, Illinois 60654

Tel: (312) 923-2952

Fax: (312) 840-7352

csteege@jenner.com

dpanos@jenner.com

mroot@jenner.com

Counsel for the Debtor

EXHIBIT 5

Publication Notice

**UNITED STATES BANKRUPTCY COURT
FOR THE SOUTHERN DISTRICT OF INDIANA**

**In re USA Gymnastics
18-09108-RLM-11**

**YOU MAY HAVE A
CLAIM AGAINST USA GYMNASTICS**

On December 5, 2018, USA Gymnastics (the “**Debtor**”) filed for relief under the Bankruptcy Code. The Debtor, its address, case number, proof of claim forms, and other relevant information related to this chapter 11 case may be obtained from Omni Management Group (the “**Claims Agent**”) at:
<https://omnimgt.com/usagymnastics/>.

**THE LAST DAY TO FILE CLAIMS AGAINST THE
DEBTOR, INCLUDING CLAIMS FOR SEXUAL
ABUSE, IS APRIL 29, 2019
AT 4:00 P.M. (PREVAILING EASTERN TIME).**

**IF YOU WERE SEXUALLY ABUSED BY ANY PERSON
(INCLUDING A MEDICAL PROFESSIONAL)
AFFILIATED WITH THE DEBTOR YOU MUST FILE A
SEXUAL ABUSE CLAIM BY APRIL 29, 2019 AT 4:00
P.M. (PREVAILING EASTERN TIME).**

For more information, including a full definition of “Sexual Abuse Claim” and instructions on how to obtain and file a Sexual Abuse Proof of Claim Form and associated documents, please visit the Claims Agent’s designated website:
<https://omnimgt.com/usagymnastics/sexualabuseclaims>, or call the Claims Agent at 1-888-682-0360.

Only Sexual Abuse Claims shall be submitted on the Sexual Abuse Proof of Claim Form. All other Claims (including tort claims not arising from sexual abuse) shall be submitted on a general proof of claim form, also available from the Claims Agent’s website.

EXHIBIT 6

Confidentiality Agreement

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE SOUTHERN DISTRICT OF INDIANA
INDIANAPOLIS DIVISION**

In re:

USA GYMNASTICS,¹

Debtor.

Chapter 11

Case No. 18-09108-RLM-11

PERMITTED PARTY CONFIDENTIALITY AGREEMENT

This Agreement (“**Agreement**”) is entered into as of ____, 2019 by ____ (the “**Recipient**”), a Permitted Party pursuant to paragraph 12 of the *Order Establishing Deadlines For Filing Proofs Of Claim And Approving Form And Manner Of Notice Thereof* (the “**Order**”) [Docket No. ____] on February ____, 2019 by the United States Bankruptcy Court for the Southern District of Indiana (the “**Court**”) in case no. 18-09108, *In Re: USA Gymnastics* (the “**Case**”).

WHEREAS, the Recipient will be granted access to confidential Sexual Abuse Proof of Claim Forms² filed in the Case after execution of this Agreement pursuant to and in accordance with the terms of the Order; and

WHEREAS, Recipient agrees to keep the information provided in any and all Sexual Abuse Proof of Claim Forms confidential pursuant to and in accordance with the terms of the Order and this Agreement.

NOW THEREFORE, IT IS AGREED AS FOLLOWS:

1. The Recipient agrees to keep the information provided in the Sexual Abuse Proof of Claim Forms confidential pursuant to and in accordance with the terms of the Order.
2. Recipient agrees to not distribute any Sexual Abuse Proof of Claim Forms or information provided in the Sexual Abuse Proof of Claim Forms in violation of the Confidentiality Protocol in the Order.
3. Recipient will only communicate information from the confidential Sexual Abuse Proof of Claim Forms with other Permitted Parties who have executed a confidentiality agreement pursuant to the Order.

¹ The last four digits of the Debtor’s federal tax identification number are 7871. The location of the Debtor’s principal office is 130 E. Washington Street, Suite 700, Indianapolis, Indiana 46204.

² Capitalized terms used but not defined herein shall have the meaning and definitions ascribed to them in the Order.

4. Recipient consents to the jurisdiction of the Court to adjudicate any violation of this Agreement or the Order.
5. Recipient shall promptly report any disclosure of information from a confidential Sexual Abuse Proof of Claim Form to the Debtor and the Committee, and shall cooperate with efforts to recover the information and/or mitigate the effects of the disclosure.

Dated: This ___ day of _____ 2019.

Signature:

Print Name:

Name of Permitted Party:
